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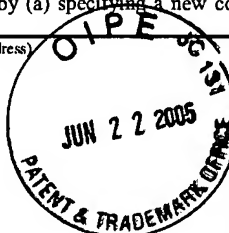
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3528 7590 05/11/2005

**STOEL RIVES LLP - PDX
900 SW FIFTH AVENUE
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PORTLAND, OR 97204**

06/23/2005 MBERHE1 00000077 10611798

01 FC:1501 1400.00 DP
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Connie English	(Depositor's name)
<i>[Signature]</i>	(Signature)
June 20, 2005	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/611,798	06/30/2003	Yunlong Sun	50001/103:1	5083

TITLE OF INVENTION: LASER PULSE PICKING EMPLOYING CONTROLLED AOM LOADING

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	08/11/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
FLORES RUIZ, DELMA R	2828	372-026000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 **Stoel Rives LLP**
2 _____
3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Electro Scientific Industries, Inc. Portland, Oregon

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
☒ Advance Order - # of Copies **10**

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☒ A check in the amount of the fee(s) is enclosed.
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5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

(deficiencies only)

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Authorized Signature *Michael L. Levine*

Date **June 20, 2005**

Typed or printed name **Michael L. Levine**

Registration No. **33,947**

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